

Label (See instructions on page 14.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign	LABEL HERE	For the year Jan. 1-Dec. 31, 2008, or other tax year beginning , 2008, ending , 20		OMB No. 1545-0074	
		Your first name and initial CARL M.		Last name LEVIN	
		If a joint return, spouse's first name and initial BARBARA		Last name LEVIN	
		Home address (number and street). If you have a P.O. box, see page 14. [REDACTED]		Apt. no. [REDACTED]	
		City, town or post office, state, and ZIP code. If you have a foreign address, see page 14. [REDACTED]		You must enter your SSN(s) above. [REDACTED]	
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 14) <input checked="" type="checkbox"/> You <input checked="" type="checkbox"/> Spouse					
Filing Status					
1 <input type="checkbox"/> Single		4 <input type="checkbox"/> Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. ▶			
2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income)					
3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶		5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see page 16)			
Exemptions					
6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a		Boxes checked on 6a and 6b 2			
b <input checked="" type="checkbox"/> Spouse		No. of children on 6c who: • lived with you • did not live with you due to divorce or separation (see page 18)			
c Dependents:					
(1) First name Last name		(2) Dependent's social security number		(3) Dependent's relationship to you	
				(4) If qualifying child for child tax credit (see page 17)	
d Total number of exemptions claimed		Add numbers on lines above 2			
Income					
7 Wages, salaries, tips, etc. Attach Form(s) W-2		7		149,331.	
8a Taxable interest. Attach Schedule B if required		8a		212.	
b Tax-exempt interest. Do not include on line 8a		8b		245.	
9a Ordinary dividends. Attach Schedule B if required		9a			
b Qualified dividends (see page 21)		9b			
10 Taxable refunds, credits, or offsets of state and local income taxes		10		0.	
11 Alimony received		11		STMT 6	
12 Business income or (loss). Attach Schedule C or C-EZ		12			
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>		13		-1,361.	
14 Other gains or (losses). Attach Form 4797		14			
15a IRA distributions		15a		b Taxable amount	
16a Pensions and annuities		16a		b Taxable amount	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17		34,425.	
18 Farm income or (loss). Attach Schedule F		18			
19 Unemployment compensation		19			
20a Social security benefits		20a		39,133.	
b Taxable amount (see page 26)		20b		33,263.	
21 Other income. List type and amount (see page 28)		21			
22 Add the amounts in the far right column for lines 7 through 21. This is your total income		22		235,351.	
Adjusted Gross Income					
23 Educator expenses (see page 28)		23			
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ		24			
25 Health savings account deduction. Attach Form 8889		25			
26 Moving expenses. Attach Form 3903		26			
27 One-half of self-employment tax. Attach Schedule SE		27			
28 Self-employed SEP, SIMPLE, and qualified plans		28			
29 Self-employed health insurance deduction (see page 29)		29			
30 Penalty on early withdrawal of savings		30			
31a Alimony paid b Recipient's SSN ▶		31a			
32 IRA deduction (see page 30)		32			
33 Student loan interest deduction (see page 33)		33			
34 Tuition and fees deduction. Attach Form 8917		34			
35 Domestic production activities deduction. Attach Form 8903		35			
36 Add lines 23 through 31a and 32 through 35		36			
37 Subtract line 36 from line 22. This is your adjusted gross income		37		235,351.	

Tax and Credits

Standard Deduction for -

• People who checked any box on line 39a, 39b, or 39c or who can be claimed as a dependent.

• All others:

Single or Married filing separately, \$5,450

Married filing jointly or Qualifying widow(er), \$10,900

Head of household, \$8,000

38	Amount from line 37 (adjusted gross income)	38	235,351.
39a	Check <input checked="" type="checkbox"/> You were born before January 2, 1944, <input type="checkbox"/> Blind. <input checked="" type="checkbox"/> Spouse was born before January 2, 1944, <input type="checkbox"/> Blind. Total boxes checked ... 39a 2		
b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 34 and check here	39b	<input type="checkbox"/>
c	Check if standard deduction includes real estate taxes or disaster loss (see page 34)	39c	<input type="checkbox"/>
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	45,221.
41	Subtract line 40 from line 38	41	190,130.
42	If line 38 is over \$119,975, or you provided housing to a Midwestern displaced individual, see page 36. Otherwise, multiply \$3,500 by the total number of exemptions claimed on line 6d	42	7,000.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	183,130.
44	Tax. Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	40,020.
45	Alternative minimum tax. Attach Form 6251	45	1,230.
46	Add lines 44 and 45	46	41,250.

Other Taxes

47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Credit for the elderly or the disabled. Attach Schedule R	49	
50	Education credits. Attach Form 8863	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit (see page 42). Attach Form 8901 if required	52	
53	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695	53	
54	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	
55	Add lines 47 through 54. These are your total credits	55	
56	Subtract line 55 from line 46. If line 55 is more than line 46, enter -0-	56	41,250.
57	Self-employment tax. Attach Schedule SE	57	
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60	Additional taxes: a <input type="checkbox"/> AEIC payments b <input checked="" type="checkbox"/> Household employment taxes. Attach Schedule H	60	784.
61	Add lines 56 through 60. This is your total tax	61	42,034.

Payments

If you have a qualifying child, attach Schedule EIC.

62	Federal income tax withheld from Forms W-2 and 1099	62	48,787.
63	2008 estimated tax payments and amount applied from 2007 return	63	
64a	Earned income credit (EIC)	64a	
b	Nontaxable combat pay election	64b	
65	Excess social security and tier 1 RRTA tax withheld (see page 61)	65	
66	Additional child tax credit. Attach Form 8812	66	
67	Amount paid with request for extension to file (see page 61)	67	
68	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	68	
69	First-time homebuyer credit. Attach Form 5405	69	
70	Recovery rebate credit (see worksheet on pages 62 and 63)	70	
71	Add lines 62 through 70. These are your total payments	71	48,787.

Refund

Direct deposit? See page 63 and fill in 73b, 73c, and 73d, or Form 8888.

72	If line 71 is more than line 61, subtract line 61 from line 71. This is the amount you overpaid	72	6,753.
73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here	73a	6,753.
b	Routing number	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
74	Amount of line 72 you want applied to your 2009 estimated tax	74	

Amount You Owe

75	Amount you owe. Subtract line 71 from line 61. For details on how to pay, see page 65	75	
76	Estimated tax penalty (see page 65)	76	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 66)? ☒ Yes. Complete the following. ☐ No

Designee's name	PREPARER	Phone no.		Personal identification number (PIN)	
-----------------	----------	-----------	--	--------------------------------------	--

Sign Here

Joint return? See page 15. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
		SENATOR	
		RETIRED	

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed	Preparer's SSN or PTIN
ROBERT KLEIMAN	04/08/09	<input type="checkbox"/>	
Firm's name (or yours if self-employed), address, and ZIP code	EIN	Phone no.	
VIRCHOW, KRAUSE & COMPANY, LLP		248-372-7300	
ONE TOWNE SQUARE, SUITE 600			
SOUTHFIELD, MI 48076			

SCHEDULES A&B
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Schedule A - Itemized Deductions

(Schedule B is on page 2)

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedules A&B (Form 1040).**

OMB No. 1545-0074

2008

Attachment
Sequence No. 07

Name(s) shown on Form 1040

Your social security number

CARL M. & BARBARA LEVIN

**Medical
and
Dental
Expenses**

Caution. Do not include expenses reimbursed or paid by others.

- | | | | |
|---|---|---|--|
| 1 | Medical and dental expenses (see page A-1) | 1 | |
| 2 | Enter amount from Form 1040, line 38 | 2 | |
| 3 | Multiply line 2 by 7.5% (.075) | 3 | |
| 4 | Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- | 4 | |

**Taxes You
Paid**

(See
page A-2.)

- | | | | |
|---|---|---|---------|
| 5 | State and local (check only one box):
a <input checked="" type="checkbox"/> Income taxes, or
b <input type="checkbox"/> General sales taxes | 5 | 11,324. |
| 6 | Real estate taxes (see page A-5) | 6 | 4,580. |
| 7 | Personal property taxes | 7 | |
| 8 | Other taxes. List type and amount
▶ <u>LIONS DEN - REAL ESTATE</u> 3,010. | 8 | 3,010. |
| 9 | Add lines 5 through 8 | 9 | 18,914. |

**Interest
You Paid**

(See
page A-5.)

Note.
Personal
interest is
not
deductible.

- | | | | |
|----|--|----|--|
| 10 | Home mortgage interest and points reported to you on Form 1098 | 10 | |
| 11 | Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-6 and show that person's name, identifying no., and address | 11 | |
| 12 | Points not reported to you on Form 1098 | 12 | |
| 13 | Qualified mortgage insurance premiums (See page A-6) | 13 | |
| 14 | Investment interest. Attach Form 4952 if required. (See page A-6.) | 14 | |
| 15 | Add lines 10 through 14 | 15 | |

**Gifts to
Charity**

If you made a
gift and got a
benefit for it,
see page A-7.

- | | | | |
|----|---|----|---------|
| 16 | Gifts by cash or check | 16 | 22,761. |
| 17 | Other than by cash or check. If any gift of \$250 or more, see page A-8.
You must attach Form 8283 if over \$500 | 17 | |
| 18 | Carryover from prior year | 18 | |
| 19 | Add lines 16 through 18 | 19 | 22,761. |

**Casualty and
Theft Losses**

- | | | | |
|----|---|----|--|
| 20 | Casualty or theft loss(es). Attach Form 4684. (See page A-8.) | 20 | |
|----|---|----|--|

**Job Expenses
and Certain
Miscellaneous
Deductions**

(See
page A-9.)

- | | | | |
|----|--|----|----------|
| 21 | Unreimbursed employee expenses - job travel, union dues, job education, etc.
Attach Form 2106 or 2106-EZ if required. (See page A-9.) | 21 | |
| 22 | Tax preparation fees | 22 | 985. |
| 23 | Other expenses - investment, safe deposit box, etc. List type and amount
▶ <u>PROFESSIONAL DUES</u> 315.
<u>EXPENSES FOR MEMBER OF CONGRESS</u> 7,707. | 23 | 8,022. |
| 24 | Add lines 21 through 23 | 24 | 9,007. |
| 25 | Enter amount from Form 1040, line 38 | 25 | 235,351. |
| 26 | Multiply line 25 by 2% (.02) | 26 | 4,707. |
| 27 | Subtract line 26 from line 24. If line 26 is more than line 24, enter -0- | 27 | 4,300. |

**Other
Miscellaneous
Deductions**

- | | | | |
|----|--|----|--|
| 28 | Other - from list on page A-10. List type and amount | 28 | |
|----|--|----|--|

**Total
Itemized
Deductions**

- | | | | | |
|----|---|-----------|----|---------|
| 29 | Is Form 1040, line 38, over \$159,950 (over \$79,975 if married filing separately)?
<input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.
<input checked="" type="checkbox"/> Yes. Your deduction may be limited. See page A-10 for the amount to enter. | STMT 10 ▶ | 29 | 45,221. |
| 30 | If you elect to itemize deductions even though they are less than your standard deduction, check here | | | |

Name(s) shown on Form 1040. Do not enter name and social security number if shown on page 1.

Your social security number

CARL M. & BARBARA LEVIN

Schedule B - Interest and Ordinary Dividends

Attachment
Sequence No. 08**Part I**
Interest

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ▶

FIDELITY # [REDACTED]
NATIONAL CAPITAL BANK
U.S. SENATE FEDERAL CREDIT UNION
FROM K-1 - LRS COMPANY

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

SUBTOTAL FOR LINE 1

TAX-EXEMPT INTEREST

SEE STATEMENT 11

- 2 Add the amounts on line 1 2
- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 3
- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a 4

Note. If line 4 is over \$1,500, you must complete Part III.

Part II
Ordinary Dividends

- 5 List name of payer ▶

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

- 6 Add the amounts on line 5. Enter the total here and on Form 1040, line 9a 6

Note. If line 6 is over \$1,500, you must complete Part III.

Part III
Foreign Accounts and Trusts

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; or (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a At any time during 2008, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22.1

- b If "Yes," enter the name of the foreign country ▶

- 8 During 2008, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?

If "Yes," you may have to file Form 3520. See page B-2

Yes	No
	X
	X

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Capital Gains and Losses

▶ Attach to Form 1040 or Form 1040NR. ▶ See instructions for Schedule D (Form 1040).
▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

2008
Attachment
Sequence No. **12**

Name(s) shown on return

Your social security number

CARL M. & BARBARA LEVIN

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
1					
2 Enter your short-term totals, if any, from Schedule D-1, line 2		2			
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)		3			
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6	()
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)				7	

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
8 FIDELITY [REDACTED]	04/13/00	05/01/08	1,938.	3,299.	-1,361.
9 Enter your long-term totals, if any, from Schedule D-1, line 9		9			
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)		10	1,938.		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12	
13 Capital gain distributions				13	
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14	()
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to Part III on page 2				15	-1,361.

LHA For Paperwork Reduction Act Notice, see Form 1040 or Form 1040NR instructions.

Schedule D (Form 1040) 2008

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	-1,361.
If line 16 is: <ul style="list-style-type: none">• A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.• A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.• Zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.		
17 Are lines 15 and 16 both gains? <input type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions	18	
19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions	19	
20 Are lines 18 and 19 both zero or blank? <input checked="" type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 38 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below. <input type="checkbox"/> No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: <ul style="list-style-type: none">• The loss on line 16 or• (\$3,000), or if married filing separately, (\$1,500)	21	(1,361.)
Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 38 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). <input checked="" type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2008

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc.)

OMB No. 1545-0074

2008

Attachment
Sequence No. **13**

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ See Instructions for Schedule E (Form 1040).

Name(s) shown on return

Your social security number

CARL M. & BARBARA LEVIN

Part I **Income or Loss From Rental Real Estate and Royalties** Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see page E-3). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1 List the type and address of each rental real estate property:	2 For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of: • 14 days or • 10% of the total days rented at fair rental value? (See page E-3.)	Yes	No
A RENTAL PORTION OF RESIDENCE [REDACTED]		A	X
B		B	
C		C	

Income:	Properties			Totals (Add columns A, B, and C.)
	A	B	C	
3 Rents received	3 14,400.			3 14,400.
4 Royalties received	4			4
Expenses:				
5 Advertising	5			
6 Auto and travel (see page E-4)	6			
7 Cleaning and maintenance	7 120.			
8 Commissions	8			
9 Insurance	9 571.			
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see page E-5)	12			12
13 Other interest	13			
14 Repairs	14 125.			
15 Supplies	15			
16 Taxes	16 2,290.			
17 Utilities	17 1,286.			
18 Other (list) ▶ SEE STATEMENT 12	18 1,152.			
19 Add lines 5 through 18	19 5,544.			19 5,544.
20 Depreciation expense or depletion (see page E-5)	20 764.			20 764.
21 Total expenses. Add lines 19 and 20	21 6,308.			
22 Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file Form 6198	22 8,092.			
23 Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23			
24 Income. Add positive amounts shown on line 22. Do not include any losses				24 8,092.
25 Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here				25 ()
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2				26 8,092.

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

CARL M. & BARBARA LEVIN

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See page E-1.27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☒ Yes ☐ No

If you answered "Yes," see page E-7 before completing this section.

28	(a) Name	(b) Enter P for partnership, S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	LEVINSON-LEVIN PROPERTIES, LLC	P			
B	LRS COMPANY	P			X
C	AT RISK CARRYOVER	P			X
D					

Passive Income and Loss			Nonpassive Income and Loss		
	(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A		26,348.			
B	7.				
C	8.				
D					
29a Totals		26,348.			
b Totals	15.				
30 Add columns (g) and (j) of line 29a				30	26,348.
31 Add columns (f), (h), and (i) of line 29b				31	(15.)
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below				32	26,333.

Part III Income or Loss From Estates and Trusts

33		(a) Name		(b) Employer identification number	
A					
B					
Passive Income and Loss				Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)		(d) Passive income from Schedule K-1		(e) Deduction or loss from Schedule K-1	
(f) Other income from Schedule K-1					
A					
B					
34a	Totals				
b	Totals				
35	Add columns (d) and (f) of line 34a			35	
36	Add columns (c) and (e) of line 34b			36	()
37	Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below			37	

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39	

Part V Summary

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	34,425.
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and Schedule K-1 (Form 1041), line 14, code F (see page E-8)	42	
43 Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

At-Risk Limitations

- ▶ Attach to your tax return.
▶ See separate instructions.

2008Attachment
Sequence No. **31**

Name(s) shown on return

Identifying number

CARL M. LEVIN

Description of activity (see page 2 of the instructions)

LRS COMPANY**Part I** Current Year Profit (Loss) From the Activity, Including Prior Year Nondeductible Amounts. See page 2 of the instructions.

1	Ordinary income (loss) from the activity (see page 2 of the instructions)	1	-2,539.
2	Gain (loss) from the sale or other disposition of assets used in the activity (or of your interest in the activity) that you are reporting on:		
a	Schedule D	2a	
b	Form 4797	2b	
c	Other form or schedule	2c	
3	Other income and gains from the activity, from Schedule K-1 of Form 1065, Form 1065-B, or Form 1120S, that were not included on lines 1 through 2c	3	15.
4	Other deductions and losses from the activity, including investment interest expense allowed from Form 4952, that were not included on lines 1 through 2c	4	()
5	Current year profit (loss) from the activity. Combine lines 1 through 4. See page 3 of the instructions before completing the rest of this form	5	-2,524.

Part II Simplified Computation of Amount At Risk. See page 3 of the instructions before completing this part.

6	Adjusted basis (as defined in section 1011) in the activity (or in your interest in the activity) on the first day of the tax year. Do not enter less than zero	6	0.
7	Increases for the tax year (see page 3 of the instructions)	7	
8	Add lines 6 and 7	8	
9	Decreases for the tax year (see page 4 of the instructions)	9	
10a	Subtract line 9 from line 8	10a	
b	If line 10a is more than zero, enter that amount here and go to line 20 (or complete Part III). Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	10b	

Part III Detailed Computation of Amount At Risk.

If you completed Part III of Form 6198 for 2007, see page 4 of the instructions.

11	Investment in the activity (or in your interest in the activity) at the effective date. Do not enter less than zero	11	
12	Increases at effective date	12	
13	Add lines 11 and 12	13	
14	Decreases at effective date	14	
15	Amount at risk (check box that applies):		
a	<input type="checkbox"/> At effective date. Subtract line 14 from line 13. Do not enter less than zero.		
b	<input type="checkbox"/> From 2007 Form 6198, line 19b. Do not enter the amount from line 10b of the 2007 form.	15	
16	Increases since (check box that applies):		
a	<input type="checkbox"/> Effective date	16	
b	<input type="checkbox"/> The end of your 2007 tax year	17	
17	Add lines 15 and 16	17	
18	Decreases since (check box that applies):		
a	<input type="checkbox"/> Effective date	18	
b	<input type="checkbox"/> The end of your 2007 tax year	19a	
19a	Subtract line 18 from line 17	19a	
b	If line 19a is more than zero, enter that amount here and go to line 20. Otherwise, enter -0- and see Pub. 925 for information on the recapture rules	19b	

Part IV Deductible Loss

20	Amount at risk. Enter the larger of line 10b or line 19b	20	0.
21	Deductible loss. Enter the smaller of the line 5 loss (treated as a positive number) or line 20. See the instructions to find out how to report any deductible loss and any carryover	21	0.

Note: If the loss is from a passive activity, see the Instructions for Form 8582, Passive Activity Loss Limitations, or the Instructions for Form 8810, Corporate Passive Activity Loss and Credit Limitations, to find out if the loss is allowed under the passive activity rules. If only part of the loss is subject to the passive activity loss rules, report only that part on Form 8582 or Form 8810, whichever applies.

Form **6251**Department of the Treasury
Internal Revenue Service (99)**Alternative Minimum Tax - Individuals**

▶ Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2008Attachment
Sequence No. **32**

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

CARL M. & BARBARA LEVIN**Part I Alternative Minimum Taxable Income**

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 2), and go to line 2. Otherwise, enter the amount from Form 1040, line 38 (minus any amount on Form 8914, line 2), and go to line 7. (If less than zero, enter as a negative amount.)	1	190,130.
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, OR 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	
3	Taxes from Schedule A (Form 1040), line 9	3	18,914.
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	4,300.
6	If Form 1040, line 38, is over \$159,950 (over \$79,975 if married filing separately), enter the amount from line 11 of the Itemized Deductions Worksheet on page A-10 of the instructions for Schedule A (Form 1040)	6	-754.
7	If claiming the standard deduction, enter any amount from Form 4684, line 18a, as a negative amount	7	
8	Tax refund from Form 1040, line 10 or line 21	8	
9	Investment interest expense (difference between regular tax and AMT)	9	
10	Depletion (difference between regular tax and AMT)	10	
11	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	11	
12	Interest from specified private activity bonds exempt from the regular tax	12	SEE STATEMENT 17 155.
13	Qualified small business stock (7% of gain excluded under section 1202)	13	
14	Exercise of incentive stock options (excess of AMT income over regular tax income)	14	
15	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	15	
16	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	16	
17	Disposition of property (difference between AMT and regular tax gain or loss)	17	
18	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	18	
19	Passive activities (difference between AMT and regular tax income or loss)	19	SEE STATEMENT 15 139.
20	Loss limitations (difference between AMT and regular tax income or loss)	20	
21	Circulation costs (difference between regular tax and AMT)	21	
22	Long-term contracts (difference between AMT and regular tax income)	22	
23	Mining costs (difference between regular tax and AMT)	23	
24	Research and experimental costs (difference between regular tax and AMT)	24	
25	Income from certain installment sales before January 1, 1987	25	
26	Intangible drilling costs preference	26	
27	Other adjustments, including income-based related adjustments	27	
28	Alternative tax net operating loss deduction	28	
29	Alternative minimum taxable income. Combine lines 1 through 28. (If married filing separately and line 29 is more than \$214,900, see instructions)	29	212,884.

Part II Alternative Minimum Tax (AMT)

30	Exemption. (If you were under age 24 at the end of 2008, see instructions.) IF your filing status is ... AND line 29 is not over ... THEN enter on line 30 ... Single or head of household \$112,500 \$46,200 Married filing jointly or qualifying widow(er) 150,000 69,950 Married filing separately 75,000 34,975 } STMT 16	30	54,229.
	If line 29 is over the amount shown above for your filing status, see instructions.		
31	Subtract line 30 from line 29. If more than zero, go to line 32. If zero or less, enter -0- here and on lines 34 and 36 and skip the rest of Part II	31	158,655.
32	• If you are filing Form 2555 or 2555-EZ, see page 9 of the instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here. • All others: If line 31 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 31 by 26% (.26). Otherwise, multiply line 31 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	32	41,250.
33	Alternative minimum tax foreign tax credit (see instructions)	33	
34	Tentative minimum tax. Subtract line 33 from line 32	34	41,250.
35	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J	35	40,020.
36	AMT. Subtract line 35 from line 34. If zero or less, enter -0-. Enter here and on Form 1040, line 45	36	1,230.

Part III Tax Computation Using Maximum Capital Gains Rates

37	Enter the amount from Form 6251, line 31. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions	37
38	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the AMT, if necessary) (see the instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38
39	Enter the amount from Schedule D (Form 1040), line 19 (as figured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39
40	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 38. Otherwise, add lines 38 and 39, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as figured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	40
41	Enter the smaller of line 37 or line 40	41
42	Subtract line 41 from line 37	42
43	If line 42 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 42 by 26% (.26). Otherwise, multiply line 42 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	43
44	Enter: <ul style="list-style-type: none"> • \$65,100 if married filing jointly or qualifying widow(er), • \$32,550 if single or married filing separately, or • \$43,650 if head of household. 	44
45	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	45
46	Subtract line 45 from line 44. If zero or less, enter -0-	46
47	Enter the smaller of line 37 or line 38	47
48	Enter the smaller of line 46 or line 47	48
49	Subtract line 48 from line 47	49
50	Multiply line 49 by 15% (.15)	50
If line 39 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go to line 51.		
51	Subtract line 47 from line 41	51
52	Multiply line 51 by 25% (.25)	52
53	Add lines 43, 50, and 52	53
54	If line 37 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 37 by 26% (.26). Otherwise, multiply line 37 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	54
55	Enter the smaller of line 53 or line 54 here and on line 32. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 32. Instead, enter it on line 4 of the worksheet in the instructions	55

ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT

Name(s)		Adjustment					Social Security Number
Form Name	Description	Income	Form 6251, Line 17	Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251 Other Adjustment
CARL M. & BARBARA LEVIN							
E-	RENTAL PORTION OF RESIDENCE - [REDACTED]						
	* REGULAR INCOME	8,092.					
	* AMT DEPR ADJ	133.			133.		
	* AMT NET INCOME	8,225.			133.		
K1-	LRS COMPANY						
	* REGULAR INCOME	-15.					
	* AMT NET INCOME	-15.					
K1-	LEVINSON-LEVIN PROPERTIES, LLC						
	* REGULAR INCOME	26,348.			6.		
	* AMT ADJUSTMENTS	6.			6.		
	* AMT NET INCOME	26,354.					
	** TOTAL ADJ & PREF **				139.		

SCHEDULE H
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Household Employment Taxes

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

▶ Attach to Form 1040, 1040NR, 1040-SS, or 1041.

▶ See separate instructions.

OMB No. 1545-1971

2008

Attachment
Sequence No. **44**

Name of employer

Social security number

Employer identification number

CARL M. LEVIN

A Did you pay **any one** household employee cash wages of \$1,600 or more in 2008? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions on page H-4 before you answer this question.)

- ☒ **Yes.** Skip lines B and C and go to line 1.
☐ **No.** Go to line B.

B Did you withhold federal income tax during 2008 for any household employee?

- ☐ **Yes.** Skip line C and go to line 5.
☐ **No.** Go to line C.

C Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2007 or 2008 to **all** household employees? (Do not count cash wages paid in 2007 or 2008 to your spouse, your child under age 21, or your parent.)

- ☐ **No.** Stop. Do not file this schedule.
☐ **Yes.** Skip lines 1-9 and go to line 10 on page 2. (Calendar year taxpayers having no household employees in 2008 do not have to complete this form for 2008.)

Part I Social Security, Medicare, and Federal Income Taxes

1	Total cash wages subject to social security taxes (see page H-4)	1	4,870.
2	Social security taxes. Multiply line 1 by 12.4% (.124)	2	604.
3	Total cash wages subject to Medicare taxes (see page H-4)	3	4,870.
4	Medicare taxes. Multiply line 3 by 2.9% (.029)	4	141.
5	Federal income tax withheld, if any	5	
6	Total social security, Medicare, and federal income taxes. Add lines 2, 4, and 5	6	745.
7	Advance earned income credit (EIC) payments, if any	7	
8	Net taxes (subtract line 7 from line 6)	8	745.

9 Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2007 or 2008 to **all** household employees? (Do not count cash wages paid in 2007 or 2008 to your spouse, your child under age 21, or your parent.)

- ☐ **No.** Stop. Include the amount from line 8 above on Form 1040, line 60, and check box **b** on that line. If you are not required to file Form 1040, see the line 9 instructions on page H-4.
☒ **Yes.** Go to line 10 on page 2.

Part II Federal Unemployment (FUTA) Tax

	Yes	No
10 Did you pay unemployment contributions to only one state?	X	
11 Did you pay all state unemployment contributions for 2008 by April 15, 2009? Fiscal year filers, see page H-4	X	
12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?	X	

Next: If you checked the "Yes" box on all the lines above, complete Section A.

If you checked the "No" box on any of the lines above, skip Section A and complete Section B.

Section A

13 Name of the state where you paid unemployment contributions	DC	
14 State reporting number as shown on state unemployment tax return		
15 Contributions paid to your state unemployment fund (see page H-5)	15	0% RATE
16 Total cash wages subject to FUTA tax (see page H-5)	16	4,870.
17 FUTA tax. Multiply line 16 by .008. Enter the result here, skip Section B, and go to line 26	17	39.

Section B

18 Complete all columns below that apply (if you need more space, see page H-5):

(a) Name of state	(b) State reporting number as shown on state unemployment tax return	(c) Taxable wages (as defined in state act)	(d) State experience rate period		(e) State experience rate	(f) Multiply col. (c) by .054	(g) Multiply col. (c) by col. (e)	(h) Subtract col. (g) from col. (f). If zero or less, enter -0-	(i) Contributions paid to state unemployment fund
			From	To					

19 Totals	19	
20 Add columns (h) and (i) of line 19	20	
21 Total cash wages subject to FUTA tax (see the line 16 instructions on page H-5)	21	
22 Multiply line 21 by 6.2% (.062)	22	
23 Multiply line 21 by 5.4% (.054)	23	
24 Enter the smaller of line 20 or line 23	24	
25 FUTA tax. Subtract line 24 from line 22. Enter the result here and go to line 26	25	

Part III Total Household Employment Taxes

26 Enter the amount from line 8. If you checked the "Yes" box on line C of page 1, enter -0-	26	745.
27 Add line 17 (or line 25) and line 26 (see page H-5)	27	784.
28 Are you required to file Form 1040?		

☒ **Yes.** Stop. Include the amount from line 27 above on Form 1040, line 60, and check box b on that line. Do not complete

Part IV below.

☐ **No.** You may have to complete Part IV. See page H-5 for details.**Part IV Address and Signature - Complete this part only if required. See the line 28 instructions on page H-5.**

Address (number and street) or P.O. box if mail is not delivered to street address	Apt., room, or suite no.
City, town or post office, state, and ZIP code	

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. No part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Employer's signature	Date								
Paid Preparer's Use Only	<table border="1"> <tr> <td>Preparer's signature</td> <td>Date</td> <td>Check if self-employed <input type="checkbox"/></td> <td>Preparer's SSN or PTIN</td> </tr> <tr> <td>Firm's name (or yours if self-employed), address, and ZIP code</td> <td>EIN</td> <td colspan="2">Phone no.</td> </tr> </table>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN	Firm's name (or yours if self-employed), address, and ZIP code	EIN	Phone no.	
Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN						
Firm's name (or yours if self-employed), address, and ZIP code	EIN	Phone no.							

Credit for Prior Year Minimum Tax - Individuals, Estates, and Trusts

▶ See separate instructions.
▶ Attach to Form 1040, 1040NR, or 1041.

OMB No. 1545-1073

2008

Attachment
Sequence No. 74

Name(s) shown on return

Identifying number

CARL M. & BARBARA LEVIN

Part I Net Minimum Tax on Exclusion Items

1 Combine lines 1, 6, and 10 of your 2007 Form 6251. Estates and trusts, see instructions	1	178,197.
2 Enter adjustments and preferences treated as exclusion items (see instructions)	2	22,469.
3 Minimum tax credit net operating loss deduction (see instructions)	3	()
4 Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more than \$207,500 and you were married filing separately for 2007, see instructions	4	200,666.
5 Enter: \$66,250 if married filing jointly or qualifying widow(er) for 2007; \$44,350 if single or head of household for 2007; or \$33,125 if married filing separately for 2007. Estates and trusts, enter \$22,500	5	66,250.
6 Enter: \$150,000 if married filing jointly or qualifying widow(er) for 2007; \$112,500 if single or head of household for 2007; or \$75,000 if married filing separately for 2007. Estates and trusts, enter \$75,000	6	150,000.
7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7	50,666.
8 Multiply line 7 by 25% (.25)	8	12,667.
9 Subtract line 8 from line 5. If zero or less, enter -0-. If this form is for a child under age 18, see instructions	9	53,583.
10 Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 1040NR filers, see instructions	10	147,083.
11 • If for 2007 you filed Form 2555 or 2555-EZ, see page 2 of the instructions for the amount to enter. • If for 2007 you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (lines 14a and 15, column (2), of Schedule D (Form 1041)), complete Part III of Form 8801 and enter the amount from line 51 here. Form 1040NR filers, see instructions. • All others: If line 10 is \$175,000 or less (\$87,500 or less if married filing separately for 2007), multiply line 10 by 26% (.26). Otherwise, multiply line 10 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2007) from the result. Form 1040NR filers, see instructions.	11	38,242.
12 Minimum tax foreign tax credit on exclusion items (see instructions)	12	
13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13	38,242.
14 Enter the amount from your 2007 Form 6251, line 34, or 2007 Form 1041, Schedule I, line 55	14	37,331.
15 Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-	15	911.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 8801 (2008) (Rev. 2-2009)

Part II Current Year Nonrefundable and Refundable Credits and Carryforward to 2009

16 Enter the amount from your 2007 Form 6251, line 35, or 2007 Form 1041, Schedule I, line 56	16	969.
17 Enter the amount from line 15	17	911.
18 Subtract line 17 from line 16. If less than zero, enter as a negative amount	18	58.
19 2007 credit carryforward. Enter the amount from your 2007 Form 8801, line 28	19	41.
20 Enter your 2007 unallowed qualified electric vehicle credit (see instructions)	20	
21 Enter as a negative amount any alternative minimum tax for 2007 or any prior year that is attributable to the exercise of incentive stock options and was unpaid as of October 3, 2008	21	()
22 Combine lines 18 through 21. If zero or less, enter -0-	22	99.
23 Enter 50% (.50) of the total interest and penalties you paid before October 3, 2008, on alternative minimum tax attributable to the exercise of incentive stock options for 2007 or any prior year	23	
24 Add lines 22 and 23. If zero, stop here and see instructions	24	99.
25 Enter your 2008 regular income tax liability minus allowable credits (see instructions)	25	40,020.
26 Enter the amount from your 2008 Form 6251, line 34, or 2008 Form 1041, Schedule I, line 54	26	41,250.
27 Subtract line 26 from line 25. If zero or less, enter -0-	27	0.
28 Current year nonrefundable credit. Enter the smaller of line 24 or line 27. Also enter this amount on your 2008 Form 1040, line 54 (check box b); Form 1040NR, line 49 (check box b); or Form 1041, Schedule G, line 2d	28	0.
29 • Estates and trusts: Leave lines 29 and 30 blank and go to line 31. • Individuals: Did you have a minimum tax credit carryforward to 2006 (on your 2005 Form 8801, line 26) or pay any interest or penalties before October 3, 2008, on alternative minimum tax attributable to the exercise of incentive stock options for 2007 or any prior year? <input checked="" type="checkbox"/> No. Leave lines 29 and 30 blank and go to line 31. <input type="checkbox"/> Yes. Complete Part IV of Form 8801 to figure the amount to enter	29	
30 Is line 29 more than line 28? <input type="checkbox"/> No. Leave line 30 blank and go to line 31. <input type="checkbox"/> Yes. Subtract line 28 from line 29. This is your current year refundable credit. Enter the result here and on your 2008 Form 1040, line 68 (check box c), or Form 1040NR, line 68	30	
31 Credit carryforward to 2009. Subtract the larger of line 28 or line 29 from line 24. Keep a record of this amount because you may use it in future years	31	99.

Part III Tax Computation Using Maximum Capital Gains Rates

Caution. If you did not complete the 2007 Qualified Dividends and Capital Gain Tax Worksheet, the 2007 Schedule D Tax Worksheet, or Part V of the 2007 Schedule D (Form 1041), see the instructions before completing this part.

- 32 Enter the amount from Form 8801, line 10. If you filed Form 2555 or 2555-EZ for 2007, enter the amount from line 3 of the worksheet on page 2 of the instructions

32

Caution. If for 2007 you filed Form 1040NR, 1041, 2555, or 2555-EZ, see page 4 of the instructions before completing lines 33, 34, and 35.

- 33 Enter the amount from line 6 of your 2007 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2007 Schedule D Tax Worksheet, or the amount from line 22 of the 2007 Schedule D (Form 1041), whichever applies

33

If you figured your 2007 tax using the 2007 Qualified Dividends and Capital Gain Tax Worksheet, skip line 34 and enter the amount from line 33 on line 35. Otherwise, go to line 34.

- 34 Enter the amount from line 19 of your 2007 Schedule D (Form 1040), or line 14b, column (2), of the 2007 Schedule D (Form 1041)

34

- 35 Add lines 33 and 34, and enter the smaller of that result or the amount from line 10 of your 2007 Schedule D Tax Worksheet

35

- 36 Enter the smaller of line 32 or line 35

36

- 37 Subtract line 36 from line 32

37

- 38 If line 37 is \$175,000 or less (\$87,500 or less if married filing separately for 2007), multiply line 37 by 26% (.26). Otherwise, multiply line 37 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2007) from the result. Form 1040NR filers, see instructions

38

- 39 Enter:

- \$63,700 if married filing jointly or qualifying widow(er) for 2007,
- \$31,850 if single or married filing separately for 2007,
- \$42,650 if head of household for 2007, or
- \$2,150 for an estate or trust.

Form 1040NR filers, see instructions

39

- 40 Enter the amount from line 7 of your 2007 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2007 Schedule D Tax Worksheet, or the amount from line 23 of the 2007 Schedule D (Form 1041), whichever applies. If you did not complete either worksheet or Part V of the 2007 Schedule D (Form 1041), enter -0-. Form 1040NR filers, see instructions

40

- 41 Subtract line 40 from line 39. If zero or less, enter -0-

41

- 42 Enter the smaller of line 32 or line 33

42

- 43 Enter the smaller of line 41 or line 42

43

- 44 Multiply line 43 by 5% (.05)

44

- 45 Subtract line 43 from line 42

45

- 46 Multiply line 45 by 15% (.15)

46

If line 34 is zero or blank, skip lines 47 and 48 and go to line 49. Otherwise, go to line 47.

- 47 Subtract line 42 from line 36

47

- 48 Multiply line 47 by 25% (.25)

48

- 49 Add lines 38, 44, 46, and 48

49

- 50 If line 32 is \$175,000 or less (\$87,500 or less if married filing separately for 2007), multiply line 32 by 26% (.26). Otherwise, multiply line 32 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately for 2007) from the result. Form 1040NR filers, see instructions

50

- 51 Enter the smaller of line 49 or line 50 here and on line 11. If you filed Form 2555 or 2555-EZ for 2007, do not enter this amount on line 11. Instead, enter it on line 4 of the worksheet on page 2 of the instructions

51

* The 2007 Qualified Dividends and Capital Gain Tax Worksheet is on page 35 of the 2007 Instructions for Form 1040. The 2007 Schedule D Tax Worksheet is on page D-10 of the 2007 Instructions for Schedule D (Form 1040) (page 43 of the 2007 Instructions for Form 1041).

Part IV Tentative Refundable Credit

52	Enter the amount from line 22	52	
53	Enter the total of lines 18 and 20 from your 2006 Form 8801. If zero or less, enter -0-	53	
54	Enter the total of lines 18 and 20 from your 2007 Form 8801. If zero or less, enter -0-	54	
55	Enter the total of lines 18 and 20 from your 2008 Form 8801. If zero or less, enter -0-	55	
56	Add lines 53 through 55	56	
57	Long-term unused minimum tax credit. Subtract line 56 from line 52 (If zero or less, enter -0- here and on line 61 and go to line 62)	57	
58	Multiply line 57 by 50% (.50)	58	
59	Enter the amount from your 2007 Form 8801, line 55	59	
60	Enter the larger of line 58 or line 59	60	
61	Enter the smaller of line 57 or line 60	61	
62	Enter the amount from line 23	62	
63	Add lines 61 and 62. Enter the result here and on line 29	63	

Form 8801 (2008) (Rev. 2-2009)

CHECK ONLY ONE BOX:

- A. SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING WIDOW(ER)
 X B. MARRIED FILING JOINTLY
 C. MARRIED FILING SEPARATELY AND LIVED WITH YOUR SPOUSE
 AT ANY TIME DURING 2008
 D. MARRIED FILING SEPARATELY AND LIVED APART FROM YOUR SPOUSE
 FOR ALL OF 2008

1. ENTER THE TOTAL AMOUNT FROM BOX 5 OF ALL YOUR
 FORMS SSA-1099 AND RRB-1099. ALSO, ENTER THIS AMOUNT ON
 FORM 1040, LINE 20A. 39,133.
 IF YOU CHECKED BOX B: TAXPAYER AMOUNT 23,929.
 SPOUSE AMOUNT 15,204.
2. ENTER ONE HALF OF LINE 1 19,567.
3. ADD THE AMOUNTS ON FORM 1040, LINE 7, 8B, 9A, 10 THRU 14,
 15B, 16B, 17 THRU 19, 21 AND SCHEDULE B, LINE 2. DO NOT
 INCLUDE ANY AMOUNTS FROM BOX 5 OF FORMS SSA-1099 OR RRB-1099 202,333.
4. ENTER THE AMOUNT OF ANY EXCLUSIONS FROM FOREIGN EARNED
 INCOME, FOREIGN HOUSING, INCOME FROM U.S. POSSESSIONS,
 OR INCOME FROM PUERTO RICO BY BONA FIDE RESIDENTS OF
 PUERTO RICO THAT YOU CLAIMED
5. ADD LINES 2, 3, AND 4. 221,900.
6. ADD THE AMOUNTS ON FORM 1040, LINES 23 THROUGH LINE 32,
 AND ANY WRITE-IN ADJUSTMENTS YOU ENTERED ON THE DOTTED
 LINE NEXT TO LINE 36. 0.
7. SUBTRACT LINE 6 FROM LINE 5 221,900.
8. ENTER: \$25,000 IF YOU CHECKED BOX A OR D, OR
 \$32,000 IF YOU CHECKED BOX B, OR
 \$-0- IF YOU CHECKED BOX C. 32,000.
9. IS THE AMOUNT ON LINE 8 LESS THAN THE AMOUNT ON LINE 7?
 [] NO. STOP. NONE OF YOUR SOCIAL SECURITY BENEFITS ARE
 TAXABLE. ENTER -0- ON FORM 1040, LINE 20B. IF YOU ARE
 MARRIED FILING SEPARATELY AND YOU LIVED APART FROM YOUR
 SPOUSE FOR ALL OF 2008, BE SURE YOU ENTERED 'D' TO THE
 RIGHT OF THE WORD "BENEFITS" ON LINE 20A.
 [X] YES. SUBTRACT LINE 8 FROM LINE 7 189,900.
10. ENTER \$9,000 IF YOU CHECKED BOX A OR D,
 \$12,000 IF YOU CHECKED BOX B
 \$-0- IF YOU CHECKED BOX C 12,000.
11. SUBTRACT LINE 10 FROM LINE 9. IF ZERO OR LESS, ENTER -0-. 177,900.
12. ENTER THE SMALLER OF LINE 9 OR LINE 10 12,000.
13. ENTER ONE HALF OF LINE 12. 6,000.
14. ENTER THE SMALLER OF LINE 2 OR LINE 13 6,000.
15. MULTIPLY LINE 11 BY 85% (.85). IF LINE 11 IS ZERO, ENTER -0-. 151,215.
16. ADD LINES 14 AND 15. 157,215.
17. MULTIPLY LINE 1 BY 85% (.85) 33,263.
18. TAXABLE BENEFITS. ENTER THE SMALLER OF LINE 16 OR LINE 17 33,263.
 * ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 20B

FORM 1040

STATE AND LOCAL INCOME TAX REFUNDS

STATEMENT

2

	2007	2006	2005
	MICHIGAN		
GROSS STATE/LOCAL INC TAX REFUNDS	313.		
LESS: TAX PAID IN FOLLOWING YEAR	15.		
NET TAX REFUNDS MICHIGAN	298.		
	MICHIGAN		
GROSS STATE/LOCAL INC TAX REFUNDS	63.		
LESS: TAX PAID IN FOLLOWING YEAR	16.		
NET TAX REFUNDS MICHIGAN	47.		
TOTAL NET TAX REFUNDS	345.		

FORM 1040	TAXABLE STATE AND LOCAL INCOME TAX REFUNDS	STATEMENT	3
	2007	2006	2005
NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.	345.		
LESS: REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION	376.		
1 NET REFUNDS FOR RECALCULATION			
2 TOTAL ITEMIZED DEDUCTIONS BEFORE PHASEOUT	40,165.		
3 DEDUCTION NOT SUBJ TO PHASEOUT			
4 NET REFUNDS FROM LINE 1			
5 LINE 2 MINUS LINES 3 AND 4	40,165.		
6 MULT LN 5 BY APPL SEC. 68 PCT	21,421.		
7 PRIOR YEAR AGI	218,362.		
8 ITEM. DED. PHASEOUT THRESHOLD	156,400.		
9 SUBTRACT LINE 8 FROM LINE 7 (IF ZERO OR LESS, SKIP LINES 10 THROUGH 15, AND ENTER AMOUNT FROM LINE 1 ON LINE 16)	61,962.		
10 MULT LN 9 BY APPL SEC. 68 PCT	1,239.		
11 ALLOWABLE ITEMIZED DEDUCTIONS (LINE 5 LESS THE LESSER OF LINE 6 OR LINE 10)	38,926.		
12 ITEM DED. NOT SUBJ TO PHASEOUT			
13A TOTAL ADJ. ITEMIZED DEDUCTIONS	38,926.		
13B PRIOR YR. STD. DED. AVAILABLE	12,800.		
14 PRIOR YR. ALLOWABLE ITEM. DED.	38,926.		
15 SUBTRACT THE GREATER OF LINE 13A OR LINE 13B FROM LINE 14			
16 TAXABLE REFUNDS (LESSER OF LINE 15 OR LINE 1)			
17 ALLOWABLE PRIOR YR. ITEM. DED.	38,926.		
18 PRIOR YEAR STD. DED. AVAILABLE	12,800.		
19 SUBTRACT LINE 18 FROM LINE 17	26,126.		
20 LESSER OF LINE 16 OR LINE 19			
21 PRIOR YEAR TAXABLE INCOME	172,636.		
22 AMOUNT TO INCLUDE ON FORM 1040, LINE 10 * IF LINE 21 IS -0- OR MORE, USE AMOUNT FROM LINE 20 * IF LINE 21 IS A NEGATIVE AMOUNT, NET LINES 20 AND 21			0.
STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2005			
TOTAL TO FORM 1040, LINE 10			0.

CARL M. & BARBARA LEVIN

FORM 1040

IRA DISTRIBUTIONS

STATEMENT 4

NAME OF PAYER	GROSS DISTRIBUTION	TAXABLE AMOUNT
AMERICAN FUNDS	10,000.	10,000.
FIDELITY MGT TRUST COMPANY	9,481.	9,481.
TOTAL TO FORM 1040, LINE 15	19,481.	19,481.

FORM 1040

TAX-EXEMPT INTEREST

STATEMENT 5

NAME OF PAYER	AMOUNT
FIDELITY [REDACTED]	245.
TOTAL TO FORM 1040, LINE 8B	245.

FORM 1040 REFUNDS ATTRIBUTABLE TO EST. TAX PAID FOLLOWING YR STATEMENT 6

	2007	STATE REFUND	AMOUNT SUBTRACTED FROM TAXABLE REFUND
STATE TAX PAID IN FOLLOW YEAR	300.		
	<u>X</u>	313. =	15.
TOTAL STATE TAX PAID 2007	6,114.		<u><u>15.</u></u>

STATE TAX PAID IN FOLLOW YEAR	1,060.		
	<u>X</u>	63. =	16.
TOTAL STATE TAX PAID 2007	4,240.		<u><u>16.</u></u>

FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 7

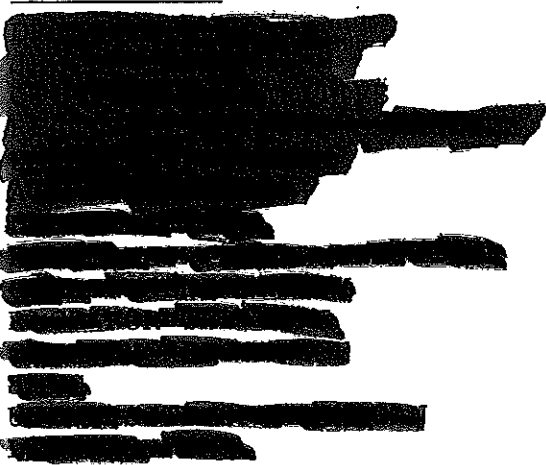
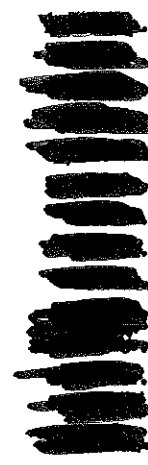
T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T UNITED STATES SENATE	149,331.	32,285.	5,735.		6,324.	2,390.
TOTALS	<u>149,331.</u>	<u>32,285.</u>	<u>5,735.</u>		<u>6,324.</u>	<u>2,390.</u>

FORM 1040 FEDERAL INCOME TAX WITHHELD STATEMENT 8

T S DESCRIPTION	AMOUNT
T UNITED STATES SENATE	32,285.
T AMERICAN FUNDS	2,000.
S FIDELITY MGT TRUST COMPANY	2,370.
T WITHHOLDING FROM FORM 1099-SSA	7,418.
S WITHHOLDING FROM FORM 1099-SSA	<u>4,714.</u>

TOTAL TO FORM 1040, LINE 62

SCHEDULE A	CASH CONTRIBUTIONS	STATEMENT	9
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DESCRIPTION	AMOUNT 100% LIMIT	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT
			
SUBTOTALS		22,761.	
TOTAL TO SCHEDULE A, LINE 16			22,761.

SCHEDULE A

ITEMIZED DEDUCTIONS WORKSHEET

STATEMENT 10

1.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 9, 15, 19, 20, 27, AND 28	45,975.
2.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 14, AND 20, PLUS ANY GAMBLING AND CASUALTY OR THEFT LOSSES INCLUDED ON LINE 28. ALSO INCLUDE IN THE TOTAL ANY AMOUNT INCLUDED ON SCHEDULE A, LINE 16, THAT YOU ELECTED TO TREAT AS QUALIFIED CONTRIBUTIONS FOR RELIEF EFFORTS IN A MIDWESTERN DISASTER AREA	0.
3.	IS THE AMOUNT ON LINE 2 LESS THAN THE AMOUNT ON LINE 1? IF NO, YOUR DEDUCTION IS NOT LIMITED. ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 29. IF YES, SUBTRACT LINE 2 FROM LINE 1	45,975.
4.	MULTIPLY LINE 3 BY 80% (.80).	36,780.
5.	ENTER THE AMOUNT FROM FORM 1040, LINE 38.	235,351.
6.	ENTER: \$159,950 (\$79,975 IF MARRIED FILING SEPARATELY)	159,950.
7.	IS THE AMOUNT ON LINE 6 LESS THAN THE AMOUNT ON LINE 5? IF NO, YOUR DEDUCTION IS NOT LIMITED. ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 29. IF YES, SUBTRACT LINE 6 FROM LINE 5	75,401.
8.	MULTIPLY LINE 7 BY 3% (.03)	2,262.
9.	ENTER THE SMALLER OF LINE 4 OR LINE 8	2,262.
10.	DIVIDE LINE 9 BY 1.5	1,508.
11.	SUBTRACT LINE 10 FROM LINE 9	754.
12.	TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LINE 11 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 29	45,221.

SCHEDULE B

TAX-EXEMPT INTEREST

STATEMENT 11

NAME OF PAYER

AMOUNT

FIDELITY 

245.

TOTAL TAX-EXEMPT INTEREST TO SCHEDULE B, LINE 1

245.

SCHEDULE E	OTHER EXPENSES	STATEMENT 12
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RENTAL PORTION OF RESIDENCE -

DESCRIPTION	AMOUNT
YARD MAINTENANCE	312.
ALARM	118.
PEST CONTROL	189.
PLUMBING	195.
AIR CONDITIONER	338.
TOTAL TO SCHEDULE E, PAGE 1, LINE 18	1,152.

FORM 6198	ALLOCATION OF INCOME AND AMOUNT AT-RISK	STATEMENT 13
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LRS COMPANY

DESCRIPTION	INCOME	LOSS	PERCENT OF LOSS	ALLOCATION OF INCOME	ALLOCATION OF AMOUNT AT-RISK
ORDINARY		1,104.	.434816857	7.	0.
SCHEDULE E C/O		1,435.	.565183143	8.	0.
INTEREST	15.				
TOTALS	15.	2,539.	1.000000000	15.	

FORM 6198	ALLOCATION OF ALLOWABLE LOSSES	STATEMENT 14
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LRS COMPANY

DESCRIPTION	LOSS	ALLOCATION OF INCOME	ALLOCATION OF AT-RISK	ALLOWABLE LOSS	DISALLOWED LOSS
ORDINARY	1,104.	7.	0.	7.	1,097.
SCHEDULE E C/O	1,435.	8.	0.	8.	1,427.
TOTALS	2,539.	15.	0.	15.	2,524.

FORM 6251

PASSIVE ACTIVITIES

STATEMENT 15

NAME OF ACTIVITY	FORM	NET INCOME (LOSS)		ADJUSTMENT
		AMT	REGULAR	
LEVINSON-LEVIN PROPERTIES, LLC	SCH E	26,354.	26,348.	6.
LRS COMPANY	SCH E	-15.	-15.	
RENTAL PORTION OF RESIDENCE - [REDACTED]	SCH E			
[REDACTED]		8,225.	8,092.	133.
TOTAL TO FORM 6251, LINE 19				139.

FORM 6251

EXEMPTION WORKSHEET

STATEMENT 16

1 ENTER: \$46,200 IF SINGLE OR HEAD OF HOUSEHOLD; \$69,950 IF
 MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$34,975
 IF MARRIED FILING SEPARATELY. 69,950.

2 ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME
 (AMTI) FORM 6251, LINE 29 212,884.

3 ENTER: \$112,500 IF SINGLE OR HEAD OF HOUSEHOLD;
 \$150,000 IF MARRIED FILING JOINTLY OR
 QUALIFYING WIDOW(ER); \$75,000 IF MARRIED
 FILING SEPARATELY 150,000.

4 SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS
 ENTER -0- 62,884.

5 MULTIPLY LINE 4 BY 25% (.25). 15,721.

6 SUBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0-. IF
 THIS FORM IS FOR A CHILD UNDER AGE 24, GO TO LINE 7 BELOW.
 OTHERWISE, STOP HERE AND ENTER THIS AMOUNT ON FORM 6251,
 LINE 30, AND GO TO FORM 6251, LINE 31 54,229.

7 CHILD'S MINIMUM EXEMPTION AMOUNT.

8 ENTER THE CHILD'S EARNED INCOME, IF ANY

9 ADD LINES 7 AND 8

10 ENTER THE SMALLER OF LINE 6 OR LINE 9 HERE AND ON FORM 6251,
 LINE 30, AND GO TO FORM 6251, LINE 31

FORM 6251

INTEREST FROM SPECIFIED PRIVATE ACTIVITY BONDS

STATEMENT 17

DESCRIPTION

AMOUNT

FIDELITY [REDACTED]

155.

TOTAL TO FORM 6251, LINE 12

155.